{deleted text} shows text that was in HB0400 but was deleted in HB0400S01.

Inserted text shows text that was not in HB0400 but was inserted into HB0400S01.

DISCLAIMER: This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

Representative Edward H. Redd proposes the following substitute bill:

# COVERAGE PARITY FOR AMINO <del>{ACID-BASED}</del> <u>ACID-BASED</u> FORMULA

2017 GENERAL SESSION STATE OF UTAH

**Chief Sponsor: Edward H. Redd** 

Senate Sponsor:

#### **LONG TITLE**

## **General Description:**

This bill amends the Insurance Code.

#### **Highlighted Provisions:**

This bill:

- provides definitions;
- requires {a health insurer to offer at least one plan that covers}the Public
  Employees' Health Plan to create a 3-year pilot program in the state employees' risk
  pool to cover amino acid-based elemental formula for the diagnosis or treatment of
  an eosinophilic gastrointestinal disorder, food protein-induced enterocolitis
  syndrome, severe protein allergic condition, or short bowel syndrome;

- limits coverage to formula ordered by a physician and obtained from a pharmacy; {
  and}
- prohibits cost sharing for elemental formula that is less favorable to the insured than
   cost sharing for prescription drugs (...); and
- <u>requires a report on the pilot program to the Social Services Appropriations</u>
  Subcommittee.

#### **Money Appropriated in this Bill:**

None

#### **Other Special Clauses:**

None

#### **Utah Code Sections Affected:**

**ENACTS**:

<del>{31A-22-623.5}</del><u>49-20-414</u>, Utah Code Annotated 1953

Be it enacted by the Legislature of the state of Utah:

Section 1. Section <del>(31A-22-623.5)</del> 49-20-414 is enacted to read:

{31A-22-623.5}49-20-414. Insurance coverage for amino acid-based formula.

- (1) As used in this section:
- (a) "Amino acid-based elemental formula" means a nutrition formula:
- (i) made from individual nonallergenic amino acids that are broken down to enhance absorption and digestion; and
- (ii) designed for individuals who have a dysfunctional or shortened gastrointestinal tract and are unable to tolerate and absorb whole foods or formulas composed of whole proteins, fats, or carbohydrates.
- (b) "Eosinophilic gastrointestinal disorder" means a disorder characterized by having above normal amounts of eosinophils in one or more specific places anywhere in the digestive system.
- (c) "Food protein-induced enterocolitis syndrome" means a disorder characterized by an abnormal immune response to an ingested food, resulting in gastrointestinal inflammation.
  - (d) "Health insurer" means an insurer, as defined in Subsection 31A-22-634(1).
  - (e) "Order" means to communicate orally, in writing, or by electronic means.

- (f) "Pharmacy" means a pharmacy licensed under Title 58, Chapter 17b, Pharmacy Practice Act.
- (g) "Physician" means an individual who is licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act.
- (h) "Program" means the eosinophilic gastrointestinal disorder program created in Subsection (2).
  - (\fh\i) "Severe protein allergic conditions" includes:
  - (i) eosinophilic esophagitis;
  - (ii) eosinophilic gastritis;
  - (iii) eosinophilic gastroenteritis;
  - (iv) eosinophilic enteritis;
  - (v) eosinophilic colitis;
  - (vi) immunoglobulin E-mediated allergies to multiple food proteins;
  - (vii) nonimmunoglobulin E-mediated allergies to multiple food proteins; or
  - (viii) food protein-induced enterocolitis syndrome.
- (<del>{ii}</del><u>j</u>) "Short bowel syndrome" means malabsorption of nutrients resulting from anatomical or functional loss of a significant length of the small intestine.
- (2) {A health insurer shall offer to a potential purchaser at least one health benefit plan} Beginning July 1, 2017, the Public Employees' Benefit and Insurance Program shall offer a 3-year pilot program within the state risk pool that provides coverage for the use of an amino acid-based elemental formula, regardless of the delivery method of the formula, for the diagnosis or treatment of an eosinophilic gastrointestinal disorder, food protein-induced enterocolitis syndrome, severe protein allergic condition, or short bowel syndrome.
- (3) Coverage offered under Subsection (2) applies to an amino acid-based elemental formula if:
  - (a) the formula is ordered for the enrollee by a physician;
  - (b) the physician indicates in the order that the formula is medically necessary; and
  - (c) the insured obtains the formula from a pharmacy.
- (4) Coverage offered under Subsection (2) may not include cost-sharing provisions, including deductibles, copayments, co-insurance, and out-of-pocket limits, or a durational limit, that are less favorable to the insured than the cost-sharing provisions and durational

limits applied by the health benefit plan to prescription drugs.

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#### **Legislative Review Note**

Office of Legislative Research and General Counsel}

is to study the efficacy of providing coverage for the use of an amino acid-based elemental

formula and is not a mandate for coverage of an amino acid-based elemental formula within the health plans offered by the Public Employees' Benefit and Insurance Program.

- (b) The Public Employees' Benefit and Insurance Program shall, on or before

  November 30, 2020, report to the Social Services Appropriations Subcommittee regarding the costs and benefits of the program.
- (6) The program shall be funded on an ongoing basis through the risk pool established in Subsection 49-20-202(1)(a).